| į. | | | | | | | | Application or Docket Number | | | | | | |
|-----------------------------|--|--|---------------------------------------|---|---------------------|---------------------------------------|------------|------------------------------------|--------------|--------------------------------------|-------|-------------------------------|----------------------|--|
| u wi | sh to be take | APPLICATIO | data)(B. envi | ferture 26 | 303 orie | es, please r | eolv | back | o th | lis email | with | 128 Take off | list" in | |
| esse sorie | es, please lis | reu will net rec et Classific Shall shall | Sofd /LED e (Column | u pak ail | l so that | r ANY Instit I we can be Imn 2) | sur | advisd SMALL TYPE | TICS PIER | o∷liyoul qqqqgetaı | ny of | Multiple of Overland of Small | THAN | |
| TOTAL CLAIMS | | | 3 | | | | | RATE | | FEE | 1 | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | | 385.00 | OR | BASIC FEE | 770.0 | |
| TOTAL CHARGEABLE CLAIMS | | | ح/ minus 20= | | · // | | | X\$ 9= | | | OR | X\$18= | 198 | |
| INDEPENDENT CLAIMS | | | 5 minus 3 = | | * 2 | | | X43= | | | OR | X86= | 172 | |
| MUL | TIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | +145= | | | OR | +290= | | |
| * If t | he difference | in column 1 is | less than zero, enter "0" in column 2 | | | | TOTAL | | | OR | TOTAL | 1148 | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | 1 | | | OTHER | | |
| , , | | (Column 1) CLAIMS | | (Colur | | | | SMAL | | ENTITY O | | SMALL | | |
| ENT A | | REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | = | ADDI- TIONAL FEE | | RATE | ADDI TIONA FEE | |
| AMENDMENT | Total | * | Minus | ** | | ± | | X\$ 9: | = | | OR | X\$18= | | |
| ME | Independent | * | Minus | *** | | = | | X43= | | | OR | X86= | | |
| | FIRST PRESENTATION OF MULTIPL | | | PENDENT | CLAIM | | • | +145: | | | OR | +290= | · . | |
| | 123 | 45 | ·** | | | | | TOT ADDIT, F | ĀL | | | TOTAL ADDIT, FEE | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | AUDIT, F | CC 1 | | | ADDII. I ECI | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | = | ADDI- TIONAL FEE | | RATE | ADDI TIONA FEE | |
| NDW | Total | · 3 | Minus | ** 3 | / | = | | X\$ 9= | = | | OR | X\$18= | | |
| AME | Independent | + / | Mings | *** | <u> </u> | <u> </u> | ┨ ┃ | X43= | | · | OR | X86= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM [| | | | | | | +145= | 1 | | OR | +290= | | |
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| ENTC | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Colur HIGH NUM PREVIO PAID | EST BER DUSLY | PRESENT EXTRA | | RATE | | ADDI- TIONAL FEE | | RATE | ADD TION/ FEE | |
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| !≲ - | Independent | * | Minus | *** | | = | | X43= | | | OR | X86= | | |
| | HINST PRESE | NTATION OF MU | JLTIPLE DEF | PENDENT | CLAIM | | 1 | +145= | | | | +290= | | |
| • | the entry in colur | nn 1 is less than th | e entry in colu | mn 2, write | "0" in co | lumn 3. | Į l | +145= TOT | _1 | | OR | TOTAL | | |
| *** | the 'Highest Nu | mber Previously Pa mber Previously Pa ber Previously Pai | aid For IN THI | S SPACE | s less tha | in 3, enter "3." | • | ADDIT. F | EE L | ropriate box | | ADDIT. FEE | | |
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